



The Commonwealth of Massachusetts
Division of Professional Licensure
Board of Registration of
Real Estate Appraisers
239 Causeway St, Suite 500, Boston MA 02114
617-727-3055

Information for real estate appraiser trainees

Massachusetts General: Law Chapter 112, section 178 (4), provides for the licensure of real estate appraisal trainees who assist state-licensed and state-certified real estate appraisers in the performance of real estate appraisals. Licensed trainees are permitted to work only under the DIRECT supervision of a state-licensed or state –certified real estate appraiser. Be advised that both the trainee and the state-licensed or state-certified appraiser are responsible for the appraisal work performed.

Real estate appraisal trainees are held to the same high standards of practice and ethics as state-licensed and state-certified real estate appraisers. Trainees are urged to procure their own copy of the Uniform Standards of Professional Appraisal Practice (USPAP) from the Appraisal Foundation, 1029 Vermont Ave. NW, Suite 900, Washington, DC 20005-3517, 202-347-7722. Trainees are required to be familiar with the Massachusetts real estate appraisal license law and regulations. They may be obtained from the State House Book Store at 617-727-2834 or the Board's web site www.state.ma.us/reg/boards/ra.

The initial trainee license is valid for a period of three years from the next occurring birthday following the issue date. Therefore, the first license will be valid for a period of 3 to 4 years. A trainee license may be renewed only once for an additional three years. Therefore, during the term of licensure the trainee must acquire the experience necessary to become a state-licensed or state-certified appraiser should one wish to do so. All trainees who wish to renew must complete 45 hours of continuing education. The total hours must include a 7 hour USPAP update seminar.

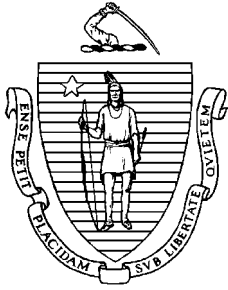
Education Requirements

Each trainee applicant must complete 45 hours of qualifying real estate education. The 45 hours must include a minimum of 15 hours on the Uniform Standards of Professional Appraisal Practice (USPAP). All courses must be approved by the Board as provided in 264 CMR. All applicants must attach verification of completion of all courses.

Applications

You must fully and correctly complete the attached application. **The non-refundable application fee is \$113.00 and license fee \$170.00. You must submit 2 separate checks payable to Comm. Of MA together with the application.**

If you have any questions, the Board's mailing address and telephone number are above.



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APPLICATION FOR LICENSURE AS A MASSACHUSETTS REAL ESTATE APPRAISER TRAINEE

| |
|-------------------------------|
| FOR OFFICE USE ONLY |
| License Number: _____ |
| Issue Date: _____ |
| Expiration Date: _____ |

Affix photo here

Please read all instructions before completing the application. Fill out the application carefully and completely. A **\$170.00 license fee and \$113.00 non-refundable application fee** must be submitted together with this application. The fee must be paid by **2 SEPARATE** checks or money orders payable to the Commonwealth of Massachusetts. Do not send cash. Mail the completed application, Education Reporting Form fee and other requested documents to the address listed above.

PLEASE COMPLETE IN INK OR TYPEWRITE

1. Affix passport type photograph (2 inches X 2 inches) above.

2. Name of applicant: _____
(First) (Middle) (Last) (Generation)

3. Sex: M ___ F ___ 4. Social security number (Mandatory): _____

Pursuant to G. L. c. 62C, s. 47A, the Division of Registration is required to obtain your social security number and forward it to the Department of Revenue. The Department will use your social security number to ascertain whether you are in compliance with the tax laws of the Commonwealth.

5. Date of birth ____/____/____ 6. Place of birth _____
mm/dd/yy

7. Telephone: Day: (____) ____-____ Evening: (____) ____-____

8. Mailing address:

(Street and P0 Box/Apt number) (City) (ST) (Zip Code)

9. Permanent address if different:

(Street and P0 Box/Apt number) (City) (ST) (Zip Code)

10. Business address if applicable:

(Street and P0 Box/Apt number) (City) (ST) (Zip Code)

11. Have you ever changed your name? ☐ Yes ☐ No
If yes state previous name(s):_____

12. Have you ever held a professional license in Massachusetts or any state or American jurisdiction? ☐ Yes ☐ No
If yes, Where? _____

13. Are you or have you ever been the subject of any disciplinary actions by a licensing/certification board located in the United States or any country or foreign jurisdiction? ☐ Yes ☐ No
If yes, attach a statement containing the nature of complaint(s) and name(s) of licensing authority(ies).

14. Have you ever been convicted of a felony or misdemeanor in the United States or any country or foreign jurisdiction, other than a traffic violation for which a fine of less than \$100.00 was assessed? ☐ Yes ☐ No
If yes, attach certified copy(ies) of the criminal judgment(s), three (3) letters of reference from people who are not related and a letter of explanation describing the occurrences in detail. If probation was served, a letter from the probation officer or office.

15. Have you ever voluntarily surrendered or resigned a professional license to a license/certification board in the United States or Foreign jurisdiction? ☐ Yes ☐ No
If yes, provide details on a separate sheet.

16. List any current license/certifications you hold in the United States or any country or foreign jurisdiction and the state/jurisdiction from which the license/certification was originally issued. Indicate the status of your license, license number, type of license and any relevant disciplinary information.

17. This application must be **SIGNED** by one reference who is not a relative and is personally known to the applicant.

I, _____, certify that the applicant, who is known to me, has a good reputation for honesty and fair dealing and is of good moral character. I will be willing to interpret or substantiate to the Board my endorsement, should the Board desire to contact me at a later date.

| <u>NAME</u> | <u>ADDRESS</u> | <u>PHONE</u> |
|--------------------|-----------------------|---------------------|
| | | |

Signature of reference: _____

EMPLOYMENT

18. Describe all employment during the past 5 years. List present employment first and attach additional sheets if necessary.

| | |
|-----------|-------------|
| Employer: | Supervisor: |
| Address: | Telephone: |
| Position: | Dates: To |
| | |
| Employer: | Supervisor: |
| Address: | Telephone: |
| Position: | Dates: To |
| | |
| Employer: | Supervisor: |
| Address: | Telephone: |
| Position: | Dates: To |
| | |
| Employer: | Supervisor: |
| Address: | Telephone: |
| Position: | Dates: To |

Education

A minimum of 45 classroom hours is required of ALL trainee applicants. Report, on the attached education reporting form, ONLY the courses sufficient to satisfy trainee licensure. The Board recommends that the first course taken be an introductory "Real Estate Appraisal" course that deals with appraisal foundations, fundamentals or basics.

19. I, _____ (the applicant), hereby state under the pains and penalties of perjury that the information provided on this application for licensure or certification as a Massachusetts Real Estate Appraiser or attached or incorporated herein is truthful and accurate. I further attest that, pursuant to M.G.L. 62C, s.49A, to the best of my knowledge and belief, I have filed all state tax returns and paid all state taxes required by law. I further understand and agree that should any information that I have provided be false it will be grounds for the Massachusetts Board of Registration of Real Estate Appraisers to suspend or revoke any license issued to me in accordance with Massachusetts law.

Signature of Applicant

Date

Signature of Notary

My commission expires on:

Checklist

- The application is fully completed and signed by the applicant
- The application of \$113.00
- The license fee of \$170.00
- The character reference is completed and signed
- The application is notarized
- All documents concerning criminal or disciplinary proceedings are attached
- The completed Appraisal Education Reporting Form is attached

APPRAISER EDUCATION REPORTING FORM

This form must be completed by all applicants **with copies of certificates attached**

Name: _____

| Course Type | School or Organization Name | Course number and title (See list of approved appraisal courses) | Dates attended (If challenge exam course, indicate date of exam) | Hours |
|--|-----------------------------|---|---|-------|
| Board approved Uniform Standards of Professional Appraisal Practice Course | | | | |
| Introductory Appraisal Courses | | | | |
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| Residential Courses | | | | |
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| Non-residential Courses | | | | |
| | | | | |
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| Other | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total Classroom Hours | | | | |